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| SERIAL NUMBER<br>10/056,991 | FILING DATE<br>01/25/2002<br><br>RULE | CLASS<br>435 | GROUP ART UNIT<br>1744 | ATTORNEY<br>DOCKET NO.<br>701039-051580 |
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\*\* CONTINUING DATA \*\*\*\*\*

None/utb

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

None/utb

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

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|  |  |                           |                        |                       |                            |
|--|--|---------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met<br>Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br><u>utb</u><br>Examiner's Signature Initials | STATE OR<br>COUNTRY<br>MA | SHEETS<br>DRAWING<br>3 | TOTAL<br>CLAIMS<br>31 | INDEPENDENT<br>CLAIMS<br>3 |
|--|--|---------------------------|------------------------|-----------------------|----------------------------|

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## TITLE

Apparatus and method for evaluating tissue engineered biological material

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|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>586 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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